| JAN-24-200  | ,<br>8 15:<br>:                     | : 36   | HP L                             | LEGAL FT C                           | OLL INS   |   |                         |          | 97Ø898                 | 7247                       | P.01          |                    |
|---|-------------------------------------|--|----------------------------------|--------------------------------------|---|---|-------------------------|----------|------------------------|----------------------------|---------------|--------------------|
| PART B - FEE(S) TRANSMITTAL   |                                     |  |                                  |                                      |   |   |                         |          |                        |                            |               |                    |
| Complete and send this form, together with applicabl  |                                     |  |                                  |                                      |   |   |                         | ents     |                        |                            |               |                    |
| INSTRUCTION. This form abould be used for transmiring the ISSUE FEB and PUBLICATION FEB (if required). Blocks 1 through 5 abould be completed where appropriate of the transmiring the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as a possible corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for |                                     |  |                                  |                                      |   |   |                         |          |                        |                            |               |                    |
| CUMACENT COMMESSION DENCE; ADDRESS (Note: Use   |                                     |  | lock ! fer my change of address) |                                      |   | Note: A certificate of mailing can only be used for domestic mailings of the Pec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. |                         |          |                        |                            |               |                    |
| HEWLE<br>P O BOX<br>INTELLE<br>FORT CO  | I he<br>Stat<br>addi<br>(ran        | Certificate of Malling or Transmission  I hereby certify that this Fee(s) Transminal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. |                                  |                                      |   |   |                         |          |                        |                            |               |                    |
| FORT COLLINS. CO 80527-2400   |                                     |  |                                  |                                      |   | Marci Santillanes   |                         |          |                        | (Depositor's name)         |               |                    |
|   | •                                   |  |                                  |                                      |   |   |                         |          |                        | Man                        | (AML(Squenze) |                    |
|   |                                     |  |                                  |                                      |   | <u>L</u>  | - 2                     |          | 01-24.08               |                            | (Da           | se)                |
| <u> </u>  | APPLICATION NO.                     |  | FILING DATE                      |                                      |   | TOR   | TOR ATTORNEY D          |          | NEY DOCKET NO.         | OCKET NO. CONFIRMATION NO. |               | 7                  |
| 10/663,1<br>TITLE OF INVE   |                                     | 09/16/2003<br>MEMORY QUALITY   | UZZA                             | RANCE                                | Ken Gary Pomaran  | ski   |                         | ;        |                        | 4003                       | 3             |                    |
| APPLN. TYP  | APPLN. TYPE SMALL EN                |  | ISSUE FEE DUE                    |                                      | PUBLICATION PER D   |   | UE PREV. PAID ISSUE FEE |          | TOTAL FEE(S) DUE       | DATE                       | DATE DUE      |                    |
| nonprovision  | nai                                 | NO   |                                  | \$1440                               | \$300   |   | 50                      |          | \$1740                 | 01/24/                     |               | J                  |
|   | EXAMIN                              | ER   |                                  |                                      | CLASS-SUBCLASS  | _   |                         | /200A    | NNGUYEN2 00000         |                            |               | 663128             |
| ×   | KIM, DANIEL Y                       |  |                                  | ART UNIT                             | 711-202000  |   | 01 50                   | - 1 FG1  | 4440.00                | na.                        | -             |                    |
| I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address Iomn PTO/SB/122) attached.  Proc Address" indication (or "Pee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.   |                                     |  |                                  |                                      | 2. For printing on the patent front page, list: 1304  (1) the names of up to 3 registered patent attorneys of agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |   |                         |          |                        |                            |               |                    |
| PLEASE NOT recordation as (A) NAME OF   | E: Unless<br>set forth is<br>ASSIGN | RESIDENCE DATA I an assignee is identi 137 CFR 3.11. Comp EE  d Development (  | fied be<br>letion o              | low, no assignee of this form is NOT | HE PATENT (print or   | e par<br>an a   | tent. If an agsigne     | e is ide | ntified below, the dne |                            | on filed f    | <del>-</del><br>br |

Please check the appropriate assignee entegory or categories (will not be printed on the patent): 🚨 Individual 🖾 Corporation or other private group entity 🚨 Government

| Publication Fee (No small entity discount permitted)                   | 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is ettached.  The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-2025 (enclose an extra copy of this form). |
|--|--|
| - A Pr WHALL DESCRIPTION STATES (HOLICECCE SDOVE)                      |  |
| a. Applicant claims SMALL ENTITY status. See 37 CFR 1,27,              | □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).   |
| NOTE: The laste Fee and Publication Fee (if remitted) will not be see- | 2 2 2 2 2 2 2 2 -  |

one other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature, Typed or printed name Steven L. Webb Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

4a. The following fee(s) are submitted:

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE